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ABSTRACT

Based on the view that emotional competence is an important contributor to an individual's success, this report focuses on the critical importance of early relationships with important adults, especially parents, on an individual's level of emotional competence. The report maintains that early interactions between parent and infant affect the child's psychological and neurological development, influencing the young child's learning readiness and also the adolescent's ability to succeed in other areas of life. The origins of trust are illustrated in descriptions of two infants and the different caregiving style of their parents. Evidence is presented from the Mother-Child Study that children not receiving sensitive, responsive care in the first few years of life were at significantly higher risk for a variety of poor developmental outcomes. Other topics discussed in the report are the impact of early relationships on brain development, factors placing parents at risk for providing care that does not facilitate their child's healthy emotional development, other influences on children's emotional development, characteristics of child care necessary for promoting healthy emotional development, and the relation between emotion and learning readiness. The report concludes with a description of promising approaches to meeting the emotional needs of young children, including pediatric health care providers sharing with parents information about children's emotional needs, community-based parent support programs, ensuring that child care is of high quality, counseling and infant mental health services, and educating child welfare workers and others who make child custody decisions about the importance of long-lasting, warm relationships. (Contains 17 reference notes.) (KB)

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Ready to Succeed

The Lasting Effects of Early Relationships

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An Ounce of Prevention Fund and ZERO TO THREE Paper

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Henry is a 16-year-old high school junior. He works hard in school, gets good grades, and is on the student council. Teachers report that Henry is a "good kid," one who rarely gets into trouble and who gets along well with his peers. He has a part-time job working in an auto parts store, and hopes to attend a junior college in a few years so that he can train to be an auto mechanic.

Joe, Henry's neighbor, is also 16 years old. After years of struggling with academic work, and after being suspended twice last year for fighting with other students, he has dropped out of school. He has had a string of low-paying jobs, but never keeps one for more than a few weeks. Joe has been arrested for shoplifting and vandalism, and has been on probation for the last year. Like Henry, he is interested in becoming an auto mechanic, but he has no plans to get the college or trade school training he would need to begin his career.

In this time of distressingly high rates of school dropout, teen pregnancy, and violence among youth, and equally alarmingly low levels of preparedness for the workplace among young adults, much attention has been paid to the question of what determines the success or failure of teenagers like Henry and Joe. Certainly many community-level factors play a role, including the quality of the school system and the economic health of the community. However, these factors cannot explain the differential success of teens within a given community. What makes the difference between Henry and Joe?

Emotional Competence: The Foundation of Success

Many characteristics of an individual contribute to his or her success or failure, including intelligence and physical abilities. But scientists are discovering that one of the most important determinants of success in adolescence and adulthood is an individual's level of emotional competence: his or her level of persistence and self-motivation, ability to cope with stress and manage strong feelings, and ability to empathize with and relate to others. "Emotionally smart" teens are able to focus on the task at hand in school or at work, can get along with peers and adults, are able to delay gratification, and can "bounce back" quickly after stressful experiences. In short, they are well-prepared to weather the social and emotional storms of adolescence, and to succeed in school, work, and personal relationships.

The question then becomes: What determines an individual's level of emotional competence? Again, it is the result of many forces, both genetic and environmental. For example, neurological impairments and traumatic experiences can dramatically affect children's emotional development. But researchers have discovered that a youth's history of relationships with important adults, especially parents, has the greatest influence on his or her emotional competence and ability to succeed. Furthermore, although parent-child relationships continue to be important across all stages of development, research shows that parent-child interactions in the first years have an amazingly strong and life-long influence on children's emotional development. These early interactions between parent and baby profoundly affect the child's psychological and neurological development, impacting not only the young child's readiness to succeed in school but also the adolescent's ability to succeed in other areas of life.

The Origins of Trust

It's 5 a.m., and 3-month-old Anne is crying loudly to let her parents know that she is ready for breakfast. Her father, exhausted from months of interrupted sleep, grudgingly pulls himself out of bed and goes to Anne's crib. He tenderly picks her up, saying "Hello, my mixed-up little angel. Don't you know it's still the middle of the night?" He cuddles and sings to Anne while he warms a bottle, and then father and baby both start to doze while he holds and feeds her in the rocking chair.

Down the street, 3-month-old Carrie is crying, too. Her exhausted parents try to ignore the crying, but soon Carrie is frantically wailing. Her mother pulls herself out of bed and gets a bottle from the refrigerator. She stands by the side of the crib and tries to push the cold bottle into Carrie's mouth, but the baby is thrashing about and can't calm down enough to start eating. "Fine, don't eat then," her mother says in frustration, throwing the bottle into the crib. She returns to bed, leaving Carrie crying, hungry and alone.

The Ounce of Prevention Fund was established in 1982 as a public/private partnership to promote the well-being of children and adolescents by working with families, communities, and policy-makers. ZERO TO THREE: National Center for Infants, Toddlers and Families was established in 1977 to advance the healthy development of America's infants, toddlers and families. This paper has benefitted from the work of several scientific researchers and other experts, including Byron Egeland and the following members of the ZERO TO THREE Board: Robert N. Emde, Stanley I. Greenspan, Irving B. Harris, Alicia F. Lieberman and Bernice Weissbourd. The design, printing and dissemination of this publication has been made possible through an educational grant from Johnson and Johnson Consumer Companies, Inc.

Anne and Carrie are learning a great deal about themselves and the world as a result of these interactions with their parents. When Anne's parents regularly and sensitively respond to her distress by providing comfort and meeting her needs, she learns that she can effectively communicate her needs to others. In a very tangible way, she feels that she is valued and worthy of others' loving care. She learns that the adults in her life are trustworthy, and can be counted on to help her if she is frustrated or distressed. Because she is forming a positive image of herself and of others right from the start, Anne is likely to display the confidence, self-control, and ability to relate to others that are necessary to succeed when she enters school. Assuming her emotional needs continue to be met and she continues to develop a warm, trusting relationship with her parents, she is likely to become a successful adolescent, one who achieves in school and at work and who is able to avoid risky behaviors.

Carrie, on the other hand, is forming a very different image of herself and of others. When her bids for attention are ignored or are met with harsh reproaches and rough handling, she is learning to be wary and distrustful of others. Without more positive experiences, she is likely to see herself as an ineffective communicator or, even more unfortunate, as someone who is unworthy of warm, responsive attention from adults. As a result, Carrie is likely to lack confidence and to have difficulty getting along with others when she enters school. Research shows that her very early experiences place her at high risk for academic failure and social and behavioral problems as she reaches adolescence.[1]

These images and expectations of self and caregiver that form during infancy have such a dramatic influence on later development because, once formed, they are increasingly resistant to change. The child's views of herself and of others become the lens through which she sees and interprets all new social interactions, and like an over-zealous scientist defending her theory, she will distort or ignore any evidence that does not fit with her established view. Furthermore, the child is likely to elicit behavior from adults and others that confirm her expectations. For example, a preschool-aged child who has come to expect that adults will rarely respond to her is likely to make excessive demands for the teacher's attention. The teacher will be forced to ignore at least some of the child's overtures, thus confirming the child's expectation that the teacher would not consistently respond to her.[2] In this way, the pictures of self and others that children form during their earliest years become self-perpetuating. Although change is possible throughout childhood and even in adulthood, negative images become increasingly difficult to change the longer the child has received insensitive, unresponsive care.

Fortunately, the positive views of self and others that children form in infancy are also resistant to change. Sensitive, responsive care in infancy and early childhood can act as a buffer against negative experiences later in life. For example, children who are physically abused in later childhood are less likely to suffer severe negative consequences if they have received consistent, responsive care during infancy.[3] Thus, the first years of life provide a unique opportunity to influence a child's life course.

Early Relationships and Later Development Among At-Risk Children

Byron Egeland and Alan Sroufe of the University of Minnesota have amassed a tremendous amount of evidence regarding the importance of early relationships for the development of children in poverty. Their Mother-Child Study, launched in 1975, has followed 176 children for 19 years from the prenatal period to adulthood. The majority of the children's mothers were single, almost half had less than a high school education, and many were teens when their children were born.

They found that children who had not received sensitive, responsive care in the first few years of life were at significantly higher risk for a wide range of poor developmental outcomes. For example, children who had received less sensitive care:

- had more difficulty forming relationships with peers in preschool and early adolescence;
- had lower levels of school achievement, especially in adolescence;
- were more likely to require special education (72% in special education by 3rd grade);
- exhibited more behavioral problems; and
- were more likely to use drugs and alcohol during adolescence.

The researchers note that both improvements and declines in healthy functioning occurred for children at all ages in their study. However, children who had an early history of secure relationships not only were less vulnerable to environmental threats than those who had poorer early relationships, but were also more likely to benefit when socio-economic conditions impacting their lives improved.

Fostering Healthy Emotional Development in Child Care

Approximately 6 million babies and toddlers are in child care in the U.S.,[14] and that number is likely to increase as a result of welfare reform. Research shows that, especially for vulnerable children and families, the quality of care that an infant receives is critically important for the child's development.[15] But there is a wide range of quality in infant child care in the U.S., and more than 80% is thought to not be of high quality.[16] An alarmingly high proportion of babies are in fact receiving care that can jeopardize their emotional development. To promote healthy emotional (and cognitive) development, infant child care should have the following characteristics:[17]

- Warm, sensitive caregivers who are trained in infant development, who understand the importance of children's early relationships, and who are able to form effective partnerships with parents;
- Low staff turnover, to ensure continuity in caregiving for children;
- Small groups of 6-8 infants or 8-10 toddlers;
- Low child-to-teacher ratios: no more than 3 (and for high-risk children, preferably 2) infants per adult; and
- Each infant assigned to only one or two primary caregivers who feed, change, and play with the baby, allowing the baby to form meaningful, secure relationships with those who care for him. Caregivers should not change each year (any more than we would recommend parents changing every year) but should stay with the same infants for at least three years.

Biological Evidence of the Importance of Early Relationships

Early parent-child relationships affect more than just the child's emerging sense of self. There is growing biological evidence that infants need sensitive, responsive care in order for the parts of their brains that control emotions to develop properly. At birth, a baby has only limited abilities to regulate her own emotions; she depends upon her caregivers to help her calm down when upset and to keep her from getting overstimulated when playing. When the caregiver effectively manages the baby's emotional states, the baby develops the neurological and emotional foundations that allow her to gradually learn how to regulate her emotions on her own.

One example of how early emotional experiences affect brain development comes from research on the brain's ability to respond appropriately to stressful experiences. Children living in overcrowded Romanian orphanages, where they have had little opportunity to form meaningful relationships with adults as infants, have chronically overactivated stress response systems.[4] Their brains keep their bodies in a constant state of "high alert," leaving the children at risk for a host of medical and learning problems as they grow. Similarly, research with home-reared American children has shown that children who receive less responsive care from their parents are likely to remain highly physiologically reactive to even mild stress.[5] This hyper-reactivity suggests that the children are not developing the ability to effectively cope with stress.

Some of the most dramatic evidence of how a lack of sensitive, responsive care can affect the developing brain comes from work with children of chronically depressed mothers. It has been well documented that mothers suffering from untreated depression often fail to respond to their infants' cries and bids for attention and show little positive emotion when interacting with their babies. Researchers have discovered aberrant patterns of brain activity in these children: their electroencephalogram (EEG) patterns resemble those of depressed adults.[6] It appears that these infants' experiences with their mothers have led their brains to develop in such a way as to "expect" negative interactions with others. Once the brain structure develops to accommodate these anticipated negative interactions, it is increasingly resistant to change, placing the child at risk for later emotional problems.

When Sensitive, Responsive Care Doesn't Come Naturally

It may seem that providing a child with sensitive, responsive care is just a natural instinct, something that all parents

should be able to do reasonably well. Indeed, the majority of parents do provide care that facilitates their child's healthy development within their cultural context. However, research has shown that across social groups, as many as 30% of children receive care that puts them at risk for later social, emotional, and cognitive difficulties.[7] Among children in poverty, the rate of emotionally inadequate care is even higher.[8]

Reading and responding to a baby's cues is not always easy. Many parents, especially young or new parents, need help learning how to tell when their baby is hungry, bored, ready to play, or ready to rest. Even the most skilled parent may have difficulty sensitively responding to her baby's signals when under severe emotional or financial stress. Furthermore, some babies are easier to "read" than others, and parents may have difficulty responding to a baby that doesn't match their expectations. They may receive confusing advice about how to treat the baby, with some friends and relatives telling them to lavish the baby with affection and attention, and others warning that the child will be spoiled if the parent holds him too much or comforts him too quickly. Parents need to be given reliable information based on research about the importance of sensitively responding to their babies' signals, and reassurance that they can meet their babies' needs.

Some parents may have particular difficulty providing sensitive care to their infants because of their own early experiences in life. Research has shown that parents who remember their own parents as cold and unresponsive are likely to act the same way with their children, whereas those who remember a warm, supportive relationship are likely to be affectionate and responsive to their children.[9] However, history is not destiny. There is ample evidence that when a father or mother has been able to re-work his or her earlier experiences (often through positive relationships later in life or counseling), he or she can indeed have a very positive relationship with his or her own children.

Other Influences on Children's Emotional Development

The evidence presented here thus far may make it seem that mothers are almost solely responsible for their children's healthy emotional development. We know that this is not true. There is growing scientific evidence that fathers play an equally crucial role in supporting children's healthy development.[10] We also know that other adults in a child's life, including grandparents, aunts and uncles, friends, teachers, and child care providers can have an important impact on the child's development.

There is also strong evidence that economic and community-level factors influence children's emotional development. Poverty is a particularly strong risk factor for poor developmental outcomes, as are low-quality child care, poorly functioning schools and a lack of community services. In contrast, well-functioning communities can provide important protective factors for children and families. Churches, community programs, and even informal neighborhood networks can provide crucial support to parents who are having difficulty raising their children. In addition, well-designed church, school, or park district programs which give older children the opportunity to form lasting, close relationships with warm, loving adults can help support their healthy development.

Emotional Breakfast: The Foundations of Learning Readiness

For several decades, educators and policy-makers have recognized that children need a nourishing breakfast each morning in order to succeed in school. Common sense tells us and research confirms that it is difficult for children to learn if they lack energy or are distracted by the rumblings of an empty stomach. Today, scientists and educators are calling attention to another kind of hunger that is limiting many students' ability to learn: emotional hunger. Like physical hunger, unmet emotional needs prevent children from engaging in the business of learning.

The link between emotion and learning is perhaps easiest to see in a newly mobile infant who is just beginning to actively explore and learn from his caregivers and environment. He learns that his gestures, such as touching his Dad's nose, can lead to a big smile and "Toot! Toot!" in return, a first lesson in causal thinking. This kind of emotional interaction with adults helps infants and children develop communication, thinking, and problem solving skills.[12]

Furthermore, when an infant has consistently received what he needs from his parents–comfort when upset, stimulation that is not overwhelming, and plenty of loving, playful interactions–he learns to trust that the world is a safe place to explore. He will occasionally "check in" with his parents for reassurance as he plays, but is free to spend most of his energy exploring and learning. In contrast, if a child has not received sensitive care from the parent, he will have difficulty trusting that the parent will keep him safe and will be there when needed. Therefore, the child spends a great deal of energy either ensuring that the parent pays attention to him, or vigilantly watching for any signs of danger in the environment. As a result, his ability to explore and to learn can be compromised.[13]

Likewise, children who have experienced a long history of unmet emotional needs are likely to have difficulty learning when they enter school. Lacking a sense that all is well with the world, they may be constantly distracted by worries or fears. They are likely to lack the confidence and sense of competence that they need to succeed. Therefore, programs designed to help children become "ready to learn" before they reach school age must pay particular attention to ensuring that the children's emotional needs are being met in infancy, toddlerhood and the preschool years.

Recommendations

Traditional intervention strategies for children at high risk for academic failure have often ignored the emotional foundations of children's development, narrowly focusing on promoting cognitive growth. Similarly, pregnancy and crime prevention programs, as well as preventive mental health services, have frequently concentrated on older children and adolescents, ignoring the key role of early experiences and relationships in fostering later success. New strategies that specifically address the emotional needs of infants, toddlers, and young children must be developed and implemented. Some promising approaches include:

- Pediatric health care providers sharing information about children's emotional needs with parents. Pediatricians with developmental training can offer this information themselves or may team up with a child development specialist who can answer parents' questions and provide reassurance, support, and helpful advice;
- Community-based parent support programs, including parent groups and home visiting models. These voluntary programs can be useful for all parents and are particularly helpful for highly stressed or young families who need more assistance in learning how to effectively meet their baby's needs;
- Ensuring that child care for infants and toddlers is of the high quality needed to support healthy emotional development; *(See box.)*
- Counseling and infant mental health services for parents who need professional help in establishing warm, positive relationships with their infants; and
- Educating child welfare and protective services workers, attorneys, and judges who make decisions about the custody of young children about the importance of long-lasting, warm, close relationships, particularly during the first three years of life.

Through these strategies we can help ensure that children develop the healthy emotional foundations necessary for success.

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